562 693-8866 P.04 APR - 2 1998



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Page Numbers 1 of 2

SUMMARY OF 510(K) SUBMISSION # K980729

(1) Name of applicant: Mr. Hansen Laurence

Address

: PT. EKA WIRA ASIA

JI, Haji Zainal Arifin 128 B-C Medan 20112 - Indonesia

Phone No. 62-61-328888; 62-61-730008

62-61-520588; 62-61-730007 Fax No.

The contact persons within the firm as well as in U.S.A. are given below:

Contact person in firm

: Mr. Hansen Laurence

Fax No.

62-61-520588; 62-61-730007

Contact person in U.S.A.

: Emmy Tjoeng

Fax No.

562-693-8866

. (2) Device details

Trade Name

: Private Label - Nitrile Examination Gloves

Pre-Powdered, Blue and White Color

Classification Name

: Patient Examination Gloves

Product Code

: Nitrile 80 LZA

(3) Equivalent device

legally marketed

: Class I Nitrile Examination Gloves 80 LZA Pre-Powdered

meeting ASTM D 3578 - 95

(4) Intended use

: A patient examination glove is a disposable device intended for medical purpose that is worn on examiner's hand or finger

to prevent contamination between patient and examiners.

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SUMMARY OF 510(K) SUBMISSION # K980729

- (5) Technological characteristic of the gloves.
 - g. Dimensions

SIZES	SMALL	MEDIUM	LARGE
Length (min) mm Palm width mm Thickness	240 85 ± 10	240 95 ± 10	240 111 ± 10
1. Cuff (min) 2. Palm (min) 3. Fingertip (min)	0.1 0.1 0.1	0.1 0.1 0.1	0.1 0.1 0.1

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-	Physical Properties	Before Aging	After Aging at	: 100° for 22 hrs
	Tensile Strength Ultimate Elongation (min)	14 Mpa 700 %		14 Mpa 500 %
	Performance Requirement Characteristic	Related defeats	Inspection Level	AQL

Holes S - 4 2.5 Watertightness Width, length S - 2 Dimension **Thickness** Before & After S - 2 Physical Properties Aging

Weight of residual powder in medium size gloves: 150 \pm 50 mg

k. Bio-Compatibility (attached)

Annexure XII

Test Results as per ASTM D 3578 - 95 (attached)

Annexure V

- (6) Performance data is the same as mentioned immediately above.
- (7) Clinical data is not needed for gloves or for most devices cleared by the 510(k) process.
- (8) Non-clinical data Gloves meet or exceed the ASTM Standard. Meet FDA pin holes requirement. Meet labeling claim.





Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

APR - 2 1998

PT. Eka Wira Asia *C/O Ms. Emmy Tjoeng Official Correspondent for PT, Eka Wira Asia Glove Source, Incorporated 12110 East Slauson Avenue #3 Santa Fe Springs, California 90670

Re: K980729

Trade Name: Nitrile Examination Gloves - Powdered Blue

and White

Regulatory Class: 1 Product Code: LZA

Dated: February 23, 1998 Received: February 25, 1998

Dear Ms. Tjoeng:

We have reviewed your Section 510(k) notification of intent to market the device referenced above and we have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (Premarket Approval), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 895. A substantially equivalent determination assumes compliance with the Good Manufacturing Practice for Medical Devices: General (GMP) regulation (21 CFR Part 820) and that, through periodic GMP inspections, the Food and Drug Administration (FDA) will verify such assumptions. Failure to comply with the GMP regulation may result in regulatory action. In addition, FDA may publish further announcements concerning your device in the Federal Register. Please note: this response to your premarket notification submission does not affect any obligation you might have under sections 531 through 542 of

the Act for devices under the Electronic Product Radiation Control provisions, or other Federal laws or regulations.

This letter will allow you to begin marketing your device as described in your 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801 and additionally 809.10 for in vitro diagnostic devices), please contact the Office of Compliance at (301) 594-4692. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its internet address "http://www.fda4.gov/cdrh/dsmamain.html".

Sincerely

Timothy A. Ulatowski

Director

Division of Dental, Infection Control, and General Hospital Devices Office of Device Evaluation Center for Devices and Radiological Health

Enclosure



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ANNEXURE II

INDICATION FOR USE

Applicant

: Mr. Hansen Laurence

510(k) Number

: K980729

Device Name

: Nitrile Patient Examination Gloves - Powder .

Blue and White Color

Indication for use

A patient examination glove is a disposable device intended for medical purpose that is wom on the examiner's hand or finger to prevent contamination between patient and examiners.

(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE IF NEEDED.)

Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use_ (Per 21 CFR 801.109) OR

Over-The Counter-Use X (Optional Format 1-2-96)

(Division Sign-Off)

Division of Donal, Infection Control,

and General Hospital Devices

510(k) Number.

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FACTORY: JL. RAYA MEDAN - NAMORAMBE PS. IV KAB. DELI SERDANG